

# Hypertension

This factsheet presents data from the 1999–2000 Los Angeles County Health Survey, a biennial, population-based telephone survey of county residents. The most recent survey collected information on 8,353 adults and 6,016 children in Los Angeles County and was conducted for the Department of Health Services between September 1999 and April 2000 by Field Research Corporation.

Hypertension, or high blood pressure, affects an estimated 50 million persons in the United States. Uncontrolled hypertension is a major cause of heart disease, stroke, and kidney disease, and can damage many other organ systems, including the eyes and brain. Despite these serious health consequences, hypertension is often a silent disease until its most advanced stages. As a result, many persons with the condition are not diagnosed in a timely manner and many more remain untreated.

The most common form of hypertension is essential hypertension. The causes of essential hypertension are not well understood. However, lifestyle factors including overweight, smoking, excessive alcohol intake, high salt consumption, and physical inactivity are important factors. Adoption of healthful behaviors that address these and other factors can reduce the risk of essential hypertension in many persons. Among those with hypertension, weight loss and other lifestyle changes can also reduce blood pressure. For many persons with hypertension, treatment with one or more medications is also needed. Many anti-hypertensive medications are available and are highly effective in controlling hypertension and preventing future complications.

To reduce illness and mortality associated with hypertension, persons must have access to primary health care services that include routine blood pressure screening and follow-up care when needed. Community-based prevention efforts that promote healthful behaviors and education about hypertension are also important.

The following data on the prevalence of hypertension in the Los Angeles County adult population are based on self-reported information (i.e., respondents who report having been diagnosed with hypertension) and therefore represent minimum estimates of the problem.

## Findings:

- → Overall, 19% of adults age 18 and older in Los Angeles County, or an estimated 1,357,000 adults, have been diagnosed with hypertension or high blood pressure (Table 1).
- → The prevalence of hypertension increases with age, from 6% in the 18–24 and 25–29 age groups to 45% among those 65 and older (Figure 1).
- → The prevalence of hypertension is higher among African-Americans (28%) and whites (22%) than among Latinos (15%) and Asians/Pacific Islanders (15%; Figure 2). Differences between the racial/ethnic groups persisted after controlling for age and reported blood pressure screening in the past two years.
- → Hypertension is more prevalent among those who are overweight (21%) or obese (35%), and among those who are sedentary (22%).

SPA	Percent	95% C.I.*	Estimate
Los Angeles County	19%	±1%	1,357,000
Antelope Valley	23%	±4%	51,000
San Fernando	19%	±2%	277,000
San Gabriel	20%	±2%	267,000
Metro	19%	±2%	158,00
West	15%	±3%	80,000
South	20%	±3%	124,000
East	18%	±2%	169,000
South Bay	20%	±2%	233,000

#### Screening:

- → Most adults (91%) in Los Angeles County have had their blood pressure measured within the past two years, including 94% of African-Americans, 94% of whites, 89% of Latinos, and 90% of Asians/Pacific Islanders.
- → Ninety-five percent of those with health insurance have had their blood pressure measured within the past two years, compared to 81% of those without health insurance (Figure 3).

### Use of Medication:

- → Sixty-five percent of adults with diagnosed hypertension are taking medication to lower their blood pressure.
- → Twenty percent of adults with hypertension do not have health insurance. Among those without insurance, 43% are taking medication to control their blood pressure compared to 70% of those who have insurance (Figure 3).
- → Sixty-eight percent of adults with hypertension and a regular source of health care are taking medication compared to 30% of those without a regular source of care.
- → The likelihood of taking medication for hypertension increases with household income, from 55% among those with incomes less than 100% of poverty to 73% among those with incomes at or above 300% of poverty.
- → Asians/Pacific Islanders (73%) and whites (73%) are the most likely to be taking medication to control their blood pressure, followed by African-Americans (66%) and Latinos (49%). After controlling for the differing age distributions of these groups, the disparities in medication use persisted.

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